Rhode Island Department of Education Summer Food Service Program Management Plan Unanticipated School Closures – COVID-19

Instructions:

- If you intend to serve meals under the Summer Food Service Program (SFSP) during unanticipated school closures related to the COVID-19 virus, please complete the following information and return to the RIDE Child Nutrition Program office as soon as possible.

Name of SFSP Sponsor or School Food Authority:	CNP Connect Agreement Number:

Please provide the following applicant information:

1. Provide the names of any other Federal agencies providing assistance to the SFSP applicant organization. Check N/A if the application organization does not receive any Federal assistance outside of SFSP reimbursement.
☐ N/A
2. Has the applicant organization ever been found to be in noncompliance by any Federal agencies listed above?
☐ No ☐ yes If yes, explain:

3. Provide the following information for each anticipated serving location:				
Site Name & Address	Days Meals will be Served (S, Su, M, T, W, TH, F)	Breakfast Serving Start and End Time (if applicable)	Lunch Serving Start and End Time (if applicable)	Primary Site Contact Name and Contact Information

Please provide the following program management information:

4. Provide the schedule for making <u>pre-operational</u> visits to any non-school sites to assess the meal service facilities prior to service. Provide the name and title of the person responsible.		
Site Name	Date of Scheduled Visit	Name and Title of Person Responsible

5. Briefly describe how sites will be monitored for compliance with regulatory requirements throughout the period of unanticipated school closures. Include the name and title of the person responsible.

6. Provide a description of procedures for collecting information on the daily number and type (i.e. breakfast, lunch, etc.) of meals served to children. If the procedures vary by site type please provide a description for each of the processes that will be used. Attach a copy of the meal count record to be used, if different from the template provided by RIDE.

7. Provide a description of the plan/method used to secure corrective action if problems are observed at a site, including plans for follow-up and steps to be taken to close non-compliant sites.

8. Provide the arrangements that have been made within standards prescribed by the State Health Department for all sites, below.

Name of Site	Will leftover meals be saved for future service?		Description of how meals will be safely held prior to and during service.	Is delivery scheduled to occur no earlier than one hour prior to the beginning of the meal service, and no later than the scheduled start time of the meal service?
	Yes	No		

9. Please answer the following only if meals are delivered to sites.

a. Describe the system that will be used to adjust the number of meals delivered in	

accordance with the average number of children attending daily at sites.	
b. What are the timeframes for submitting adjustments of meal orders?	

Please provide the following program information, <u>Site Questions</u>:

Meal Service

10. How will meal service be supervised at each site? (Describe the number of staff and type of responsibilities).

Site Name	Number Staff	Description of how meal service will be supervised

11. Which meal patterns do you plan on following at your sites?

☐ National School Lunch Program (NSLP) meal pattern (School Food Authorities (SFA) only)

☐ Summer Food Service Program (SFSP) meal Pattern – Straight Serve (All components served)

☐ Summer Food Service Program (SFSP) meal Pattern – Offer Vs Serve (OVS) (Participants may decline up to 2 meal components)

12. If you plan to use "Offer Vs. Serve" (OVS) under the NSLP or SFSP meals patterns, at which sites will you be following this meal pattern? Please describe how service will be managed using OVS.

13. At any of your sites, do you plan to offer smaller portion sizes for younger children (if smaller portions sizes will be served, they must follow the Child and Adult Care Food Program (CACFP) meal pattern)? If so at which sites?

14. Do you plan on purchasing non-unitized meals from your vendor? If so, please be reminded that you will need prior approval by RIDE before doing so. Briefly describe how meal service will be managed with non-unitized meals.

15. Briefly describe how you will ensure the food safety of meals to be served in a non-congregate setting (i.e. for meal components that participants will take off-site).